



Arkansas Secretary of State

Charlie Daniels

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NOTICE OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

MARK ENTITY TYPE

- | | | |
|--|--|--|
| <input type="checkbox"/> Corporation-Profit | <input type="checkbox"/> General Partnership | <input type="checkbox"/> Limited Liability Limited Partnership |
| <input type="checkbox"/> Corporation-Non Profit | <input type="checkbox"/> Limited Partnership | |
| <input type="checkbox"/> Limited Liability Company | <input type="checkbox"/> Limited Liability Partnership | |

Pursuant to the Laws of the State of Arkansas, the undersigned submits the following statement for the purpose of changing its registered office or its registered agent, or both in the State of Arkansas. If this statement reflects a change of registered office, this form must be accompanied by notice of such change to any and all applicable entities.

1. Name of corporation: _____

2. Is the entity: ☐ Domestic or ☐ Foreign Name of Tax Contact: _____

3. Street address of registered office changing from: _____

Street Address

City, State, Zip

4. Street address to which registered office changing to: _____

Street Address

City, State, Zip

(The address of the registered office and the business address of the registered agent must be identical.)

5. Name of registered agent changing from: _____ To: _____

I, _____ hereby consent to serve as registered agent for this entity.

Successor Agent

A letter of consent from successor agent may be substituted in lieu of this signature.

A copy bearing the file marks of the Secretary of State shall be returned.

If this entity is a corporation governed by Act 576 of 1965 such change must be filed with the County Clerk of the County in which its registered office is located, unless the registered office is located in Pulaski County, in which event no filing with the County Clerk is required.

Signature of Authorized Officer

Dated: _____

Title of Authorized Officer